

Focus Auto Pte Ltd
UEN No. 201004495R
GST Reg. No. 201004495R
Tel : 6886 9097 Fax : 6481 9095
Email : claims@focusauto.com.sg

Date : 11/03/2021

BY E-MAIL / MAIL

Your ref : SFC15X
Our ref : SLE9653M

WITHOUT PREJUDICE

M/S AIG Asia Pacific Insurance Pte Ltd
78 Shenton Way, #07-16
Singapore 079120

Dear Sir/Madam,

ACCIDENT INVOLVING : (SLE9653M & SFC15X) ALONG UPPER SERANGOON ROAD

DOA: 20/01/2021 TIME: 2200 HOURS

We refer to the above matter and write on behalf of ONESTO LEASING PTE LTD, the registered owner of SLE9653M in respect of the above accident.

We are instructed that the above accident was caused by your insured's negligent driving / or management of your insured vehicle. Your insured's vehicle SFC15X collided onto the rear portion of our client vehicle SLE9653M. As a result of the accident, our client has been put to loss and expenses, particulars of which are as follows :-

1. Cost of Repair (\$3550 + 7% GST)	\$	3,798.50
2. Loss of Rental (12 days x \$120)	\$	1,440.00
3. Buy 3rd Party's GIA report	\$	29.00
4. Buy 3rd Party Insurer's Search Fee	\$	2.00
5. Buy 3rd Party's LTA Search Fee	\$	7.45

Total Amount: \$ 5,276.95

Enclosed are the following documents for your perusal.

- 1) Driver's driving license / Identity card
- 2) Certificate of Insurance
- 3) GIA report
- 4) GIA Search (SFC15X)
- 5) Original repair claim
- 6) Car Rental Agreement / Receipt

The demand herein is in respect of our client's for damages pertaining to his motor vehicle and any settlement following or subsequent to this demand shall not prejudice any claim in respect of personal injuries.

Kindly acknowledge receipt of the above said documents within 7 days and your favourable reply is deeply appreciated.

Yours faithfully,


Jenny Koh
Claims Executive
Tel: 8130 9800
Jenny Koh

Focus Auto Pte Ltd

Business Reg. No: 201004495R

GST Reg. No: 201004495R

No 1 Kaki Bukit Ave 6 Autobay

#02-50 Singapore 417883

Date : 11/03/2021

ONESTO LEASING PTE LTD

C/O NO 1 KAKI BUKIT AVENUE 6

AUTOBAY #02-48/50

SINGAPORE 417883

MOTOR VEHICLE NO : SJE3726A

TOYOTA COROLLA ALTIS CLASSIC 1.6 CVT

REPAIR CLAIM

S 3,550.00

LUMP SUM

Sub- total : S 3,550.00

7% GST : S 248.50

Total : S 3,798.50

SINGAPORE DOLLARS : THREE THOUSAND SEVEN HUNDRED AND NINETY-EIGHT CENTS FIFTY ONLY.



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the Insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date of Submission	21/01/2021 16:11 (SGT)
Date of Accident	20/01/2021 22:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	UPPER SERANGOON ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLE9653M
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	ONESTO LEASING PTE LTD
Company Reg No	2XXXXX843R
Email Address	NILESH_RAI_794@HOTMAIL.COM
Mobile Phone No	(Phone) +65-90821779
Alternative Phone No	(Office) +65-90821779

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Corolla
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire

INSURANCE COMPANY

Name of Insurance Company	NTUC
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5101550319-02 (DRIVO CLASSIC)
Cover Note Number	-

DRIVER

Name of Driver	KRISHNA MURARI S/O LAKHRAJ
NRIC No	SXXXX462E
Date Of Birth	20/06/1956
Occupation	Outdoor

Date Of Driving Pass	16/08/1977
Driving experience	43 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90821779
Alt. Phone Number	-
Email Address	NILESH_RAI_794@HOTMAIL.COM
Address	APT BLK 673 HOUGANG AVENUE 8 #03-657
Address complement	-
Postcode	530673
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Tanglin Division Headquarters
Police Station Phone No	(Phone) +65-18003910000
Alt. Police Station Phone No	(Fax) +65-63964900
Police Station Address	21 Kampong Java Road Singapore 228892
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SFC15X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	GRACE RYNN
Contact Number	(Phone) +65-81290009

Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	KRISHNA MURARI S/O LAKHRAJ
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SLE9653M
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the Insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**
I understand, acknowledge, agree and consent that :
(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' law firms/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :
(i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
(ii) investigating the accident and/or my claims;
(iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
(v) complying with applicable law in administering, processing, handling and/or dealing with my claims.
(collectively the "Purposes")
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' law firms/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law firms/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

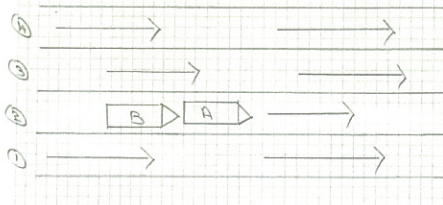


Policyholder's Signature / Date & Time

Karl 21/01/2021 12:25
Driver's Signature (If driver is not the policyholder) / Date & Time

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4 #02-02
Singapore 415933
Tel: 674 166 97 Fax: 674 92305
Email: vac@vacbu.com.sg
Witnessed by Reporting Centre Personnel

Sketch Plan



A - DL E9653M

B - SFC15X

Describe Circumstances of the Accident

Refer to Police Report No. : 210201012117003.

Declaration

I/We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

Karl M. 21/01/2021 1225

Driver's Signature (If driver is not the policyholder) / Date & Time

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4 #02-02
Singapore 415933
Tel: 67416607 Fax: 67492305
Email: vac@idac.com.sg

Witnessed by Reporting Centre Personnel



**SINGAPORE
POLICE FORCE**



E/20210121/7003

1 of 2

POLICE REPORT (NP299)

Report No. E/20210121/7003

Police Station Of Origin
Tanglin Division HQ
21 Kampong Java Road SINGAPORE
228892
Tel No:1800-3910000

Date/Time Report Made 21/01/2021 01:23	Vide Report No.	Station Diary No.
Name Of Informant KRISHNA MURARI S/O LAKHRAJ RAI	Address 673 HOUGANG AVENUE 8 #03-657 SINGAPORE 530673	
ID Type / ID No. NRIC NO / S1171462E	Contact No. Home/Office:	Mobile: 90821779
Nationality SINGAPORE CITIZEN	Email Address nilesh_rai_794@hotmail.com	
Occupation Self employed	Sex Male	Age 64
Institution/School Name	Language English	Date of Birth 20/06/1956
Date/Time Of Incident 20/01/2021 22:00	Race Indian	Location Of Incident UPPER SERANGOON ROAD

Brief details.

On the above mentioned date and time, I was driving my vehicle SLE9653M along Upper Serangoon Road towards Hougang Direction when I gradually came to a stop at the traffic light junction of Upper Serangoon Road and Upper Aljunied Road.

I was the first car at said traffic light when suddenly there was a massive impact from the rear causing my vehicle to propel forwards.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 21/01/2021 01:23
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



**SINGAPORE
POLICE FORCE**



E/20210121/7003

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. E/20210121/7003

I alighted to realise that SFC15X had crashed into my vehicle's rear.

Initially I only felt dizziness. However, I started feeling muscle soreness over multiple areas of my body soon after the accident.

I went to my family doctor at Intemedical Clinic Kovan for treatment and was given 5 days MC for my injuries.

Signature Of Officer Recording The Report:

Not applicable

Signature Of Interpreter:

Not applicable

Officer In-Charge Of Case:

Signature Of Informant:

The identity of the person making this report has been authenticated by SingPass. No signature is required.

Date/Time:

21/01/2021 01:23

Classification Of Case:

Authentication Stamp

FOR CLAIMS &
GIA REPORTING ONLY

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1171462E



Name

KRISHNA MURARI S/O LAKHRAJ
RAI

Race

INDIAN

Date of Birth

20-06-1956

Country/Place of Birth

SINGAPORE

Sex

M

S1171462E

REPUBLIC OF SINGAPORE DRIVING LICENCE

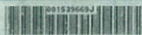
Licence Number: S1171462E

Name

KRISHNA MURARI S/O
LAKHRAJ RAI

Birth Date: 20 Jun 1956

Issue Date: 05 Nov 2007



Land Transport Authority



VOCATIONAL LICENCE

Licence No: S1171462E

Name: KRISHNA MURARI S/O L R

Issue Date: 27/12/2011

Please visit www.lta.gov.sg to check
the status of this vocational licence

FOR CLAIMS &
GIA REPORTING ONLY

6168410



NRIC No: S1171462E

Date of issue

10-04-2010

Address

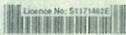
APT BLK 673 HOUGANG AVENUE 8
#03-657
SINGAPORE 530673

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

PASS DATE

- | | | |
|----------|--|-------------|
| Class 2B | Motorcycles <= 200 cc | 11 Apr 1968 |
| Class 2A | Motorcycles between 201 cc and 400 cc | 11 Apr 1968 |
| Class 3 | Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg | 16 Aug 1977 |
| Class 4 | *Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg | 26 Jul 1980 |
| | *Motor vehicles which are not constructed to carry load and the unladen weight < 7250kg | |
| Class 5 | Motor vehicles not constructed to carry any load and the unladen weight > 7250kg | 29 Mar 1981 |

Licence No: S1171462E



NP 428A

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
02	TAXI VEHICLE	08/07/1987
03	BUS VEHICLE	03/10/1990



Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 169)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number 5101550319-02 Cover : drive CLASSIC

- | | |
|--|------------------------|
| 1. Index mark and Registration Number of Vehicle | SLE9653M |
| Chassis Number | MRO53REH10435E567 |
| 2. Name of Policyholder | ONESTO LEASING PTE LTD |
| 3. Effective Date of Insurance | 03 Aug 2020 |
| 4. Expiry Date of Insurance | 07 Aug 2021 |

5. Persons or Classes of Persons entitled to drive#

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his/her permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

This Policy does not cover

(a) Use for racing, pace-making, reliability trial or speed-testing.

(b) Use for the carriage of goods (other than samples) in connection with any trade or business.

(c) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 169) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

WINDSCREEN EXCESS	\$5100
ADDITIONAL EXCESS	N/A
UNNAMED DRIVER EXCESS	PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	NO
INSURE WITH CCE	YES
NCD PROTECTION	NO
TRANSPORT ALLOWANCE	NO
EXCESS WAIVER	NO
PRIMARY DRIVER	N/A
NAMED DRIVER (1)	N/A
NAMED DRIVER (2)	N/A
HIRE PURCHASE COMPANY	TECK WEI CREDIT PTE LTD
SUM INSURED	MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 169) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : TECK WEI CREDIT PTE LTD (00000572459)
Date of Issue : 03 Aug 2020 15:37 hrs

For INTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive

ONESTO LEASING PTE. LTD.

NO. 210 TURF CLUB ROAD, THE GRANDSTAND CAR MALL, LOT A8, SINGAPORE 287995
Tel: 6465 0020 Fax: 6465 0017

HIRER PARTICULARS

ID/NTIC No/ROC : S1171462E
Name/Company : KRISHNA MURARI S/O LAKHRAJ RAI
Address : BLK 673 #03-657
HOUGANG AVENUE 8
Person in charge : KRISHNA MURARI S/O LAKHRAJ RAI
Tel: 90821779
Email : NILESH_RAI_794@HOTMAIL.COM

RENTAL AGREEMENT

HA202101-0023

Agreement Date: 13/01/2021
Rental Term: Weekly
Rental Rate: 370.00 Weekly
Agreed End Date: 12/04/2021
Agreed Period: 3 MONTHS
Contract Ref:
Excess for vehicle damage \$5 600 / 600
CDW \$35 PER WEEK

RENTAL VEHICLE/ACCESSORIES

S/N	Rental Item ID	Reg.No	Make	Model	Capacity	Rental Quantity
1	SLE9653M-001	SLE9653M	TOYOTA	COROLLAALTI CLASSIC 1.6 CVT	1598	1.00

DRIVER PARTICULARS (IF NOT STATED)

No.	Name	NRIC No.	D.O.B	Nationality	Contact No.	Address	Lic. Pass Date
1	KRISHNA MURARI S/O LAKHRAJ RAI	S1171462E	20/06/1956	SINGAPOREAN	90821779	BLK 673 #03-657 HOUGANG AVENUE 8	16/08/1977
2	NILESH RAI	S9115972D	26/04/1991	SINGAPOREAN	91260759	BLK 673 #03-657 HOUGANG AVENUE 8	

DELIVERY OF VEHICLE

Check Out By:		
Date	Time	Mileage Out
12/01/2021	1146AM	
Petrol Out: Empty 1/8 1/4 3/8 1/2 5/8 3/4 7/8 Full		
Estimated date of return:		
FRONT	LEFT	
REAR	RIGHT	
Check In By:		
Date	Time	Mileage In
Petrol In: Empty 1/8 1/4 3/8 1/2 5/8 3/4 7/8 Full		
Petrol used:		
(Note: Petrol Level to be Return as it was Rented out)		
Return Note:		
Computation Check By		

Mode Of Payment			
Credit card	<input type="checkbox"/>	Cash	<input type="checkbox"/>
Cheque	<input type="checkbox"/>	Company bill	<input type="checkbox"/>
Rental Due		345.79	
Delivery Charge			
GST Due		24.21	
Total Due		370.00	
Total Paid			
Damage Recovery			
Others			
Deposit		0.00	
Amount Refund			

NO REFUND OF DEPOSIT ON - PUBLIC HOLIDAYS - SUNDAY AND AFTER 5.00 p.m DAILY

PAYMENTS FOR DEPOSIT WILL BE REFUNDED BY CHEQUE AFTER 7 DAYS

Remarks:



CO's STAMP

Kaim

SIGNATURE



RECORD MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

TAX INVOICE

Date of Request: 22/01/2021

Your Ref No: SLE9653M

Dear Sir/Madam,

Date of Accident: 20/01/2021 00:00 (SGT)

Vehicle No: SLE9653M

Place of Accident: Woodleigh, Singapore

With reference to your application for the accident report, we have attached the following accident report as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (\$)	QTY	AMOUNT (\$)
SFC15X	Woodleigh, Singapore	(29.00)	1	(27.10)
GST Amount				(1.90)
Total Amount Due (GST Inclusive)				(29.00)

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

Thank you.

This is a computer generated document and requires no signature.



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 22 Jan 2021 / 16:42:18

Receipt Date/Time : 22 Jan 2021 / 16:42:18

Tax Invoice/Receipt

Receipt No. : ITNET-00000-210122-002811

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (\$\$)	GST Amount (\$\$)	Amount After GST (\$\$)
Result of Insurance Enquiry - SFC15X				
As at 20 Jan 2021/22:00:00				
Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.				
1	Insurance Enquiry - SFC15X Enquiry Fee 20210122164045230099	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Total Before Rounding		7.00	0.49	7.49
Rounding Difference				0.04
Total Amount Payable				7.45
Paid By				
	20210122164057160	Direct Debit: eNETS Debit (Internet Banking)		7.45
Total				7.45
Cash Change				0.00
Tendered Amount				7.45
Excess Refundable Amount				0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

INSURER ENQUIRY

Find

insurer

Vehicle reg. no.

SFC15X

Date of Accident

20/01/2021



Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance AIG

Period of Insurance 25/02/2020 - 24/02/2021

Requested By Jenny Koh Biau Leng (FOCUS ...

Requested Date 21/01/2021 12:44

Payment details

Request Amount: S\$1.87

GST Amount: S\$0.13

Total Amount Due (GST inclusive): S\$2

General Insurance Association

Records Management Centre

GST Registration No: M400017735